R E P O R T R E S U M E S

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EDUCATIONAL AND MEDICAL SERVICES TO SCHOOL-AGE EXPECTANT MOTHERS.

LOS ANGELES CITY SCHOOLS, CALIF.

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AN INTERAGENCY PROGRAM FOR UNWED PREGNANT TEENAGERS IN THE LOS ANGELES PUBLIC SCHOOL DISTRICT IS EVALUATED IN THIS REPORT. FUNDED UNDER TITLE I OF THE ELEMENTARY AND SECONDARY EDUCATION ACT, THE PROGRAM IS CONDUCTED IN OR ADJACENT TO SIX LOS ANGELES DISTRICT HEALTH CENTERS. IN ADDITION TO REGULAR MEDICAL AND INSTRUCTIONAL PERSONNEL, THE PROGRAM'S STAFF INCLUDES A COORDINATOR, A CHILD WELFARE AND ATTENDANCE OFFICIAL, A COUNSELOR, AND A SOCIAL WORKER. GIRLS ARE EXPECTED TO CONTINUE IN THE PROGRAM UNTIL ABOUT 8 WEEKS AFTER CHILDBIRTH. IT IS REPORTED THAT AS A RESULT OF THE PROGRAM THERE HAS BEEN A 6 TO 9 PERCENT INCREASE IN THE NUMBER OF SUBJECTS PASSED BY THE GIRLS IN THE HEALTH CENTER CLASSES AS COMPARED WITH THE NUMBER PASSED DURING THEIR LAST COMPLETED SEMESTER IN HIGH SCHOOL. THUS THE PROGRAM HAS ENCOURAGED POTENTIAL DROPOUTS TO REMAIN IN SCHOOL TO GRADUATE. AN IMPROVEMENT IN THE GIRLS' PHYSICAL HEALTH AND EMOTIONAL AND SOCIAL STABILITY IS ALSO REPORTED. EVALUATIVE DATA COMPILED FROM STUDENT AND STAFF RATINGS AND FROM STUDENT RECORDS AND OTHER PERTINENT SOURCES ARE PRESENTED IN THE REPORT. (LB)

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EDUCATIONAL AND MEDICAL SERVICES TO SCHOOL-AGE EXPECTANT MOTHERS

Auxillary Services Division

1.00 DESCRIPTION

This component provided educational, medical, social, and related services to school-age pregnant girls not enrolled in regular school. Six classes, located in or near Los Angeles County Health Centers, were provided for the girls to enable them to continue their education and earn credits for five subjects per semester. The date of delivery governed the return date of the mother to regular school. Births before mid-semester enabled return that semester. Births after mid-semester generally dictated return to the health center class and to regular school the following semester.

Seven teachers were assigned to the component with one teacher dividing her day between two of the largest classes. Other supportive staff included a coordinator, an assistant supervisor of child welfare and attendance, a counselor, and a nurse. Medical services were provided as needed by the public health nurse, social worker, and the medical staff of the health centers.

2.00 OBJECTIVES

-To improve the holding power of schools (to decrease the dropout rate)

-To improve the physical health of the children

-To improve the children's emotional and social stability and/or that of their families

-To identify specific strengths and weaknesses of the project

3.00 IMPLEMENTATION

3.10 Duration of Component and Number of Schools

This component was conducted from September 19, 1966, through June 23, 1967, at or adjacent to six Los Angeles County District Health Centers. A summer session was held from July 5, to August 15, 1967.

3.20 Pupils

Instruction was provided for 266 pupils in grades nine through twelve during the school year. Instruction was provided for fifty-nine new pupils and five continuing pupils in grades ten through twelve during the summer session.

3.30 Nonpublic School Pupils

The component provided services to ten girls, ranging from the tenth through the twelfth grade, who were referred from five nonpublic schools in the component area.

3.40 Activities

3.41 Staff Activities

An advisory committee of from ten to fifteen members was formed for each of the centers. The committees were composed of parents and school personnel and representatives from the following Los Angeles County agencies: Health Department, District Health Centers, Probation Department, and the Department of Public Social Services.

3.42 Pupil Activities

Activities provided for the pupils included: demonstration classes in child care, infant and child feeding; demonstrations and audio-visual material presented by the public health nurse; visitations to local hospitals to become acquainted with procedures to expect at the time of labor and delivery: a field trip to a play at Widney High School; participation in a dental education program.

3.50 Specialized Materials, Supplies, and Equipment

Specialized materials included: acquisition of a kit to demonstrate making an infant formula; filmstrips on growth and development; films on human reproduction; slide projectors for each classroom; a movie projector for use by the teaching staff.

3.60 Personnel and Logistical Problems

The long delay caused by present enrollment procedures resulted in a few pupils losing interest in continuing school while pregnant.

4.00 EVALUATION

4.10 Design

Component objectives were evaluated according to the following variables: pupil achievement data; interviews with the counselor, nurse, and assistant supervisor of child welfare and attendance; health records; and pupil and staff ratings of the effectiveness of the component.

The following instruments were employed to collect information on the variables:

-Form 87A assessed knowledge of prenatal and infant care.

-Form 87B obtained report card data in regular school and health center classes.

-Form 87C secured pupil ratings of the health center classes and of services provided.

-Form 87D gathered staff ratings of the component for the school year.

-Form 201A collected staff ratings of the component for the summer session.

-Form 87F was used in interviews to determine the roles of the nurse, counselor, and assistant supervisor of child welfare and attendance.

-Form 33.127, developed by Health Services Branch, listed the reasons for home visits by the nurse.

-Form ESEA-6, developed by Health Services Branch, obtained medical information in relation to the pregnancy of each pupil.

4.20 Attainment of Objectives

4.21 Objective: To improve the holding power of schools (to decrease the dropout rate).

Table A indicates that there was a 9 percent increase in the number of subjects passed by pupils in the health center classes in the Fall Semester, 1966 and a 6 percent increase in the Spring Semester, 1967, compared with the last completed semester in regular school.

TABLE A

COMPARISON OF SUBJECTS PASSED IN REGULAR SCHOOL AND IN HEALTH CENTER CLASS

1966-67 SCHOOL YEAR

CENTERS	REGULAR SCHOOL SUBJECTS N	TOTAL	PASSED	%	HEALTH CENTER CLASS SUBJECTS N	TOTAL	PASSED	%	% CHANGE
FALL 1966									
Northeast	11	63	50	79	11	34	34	100	21
Pacoima	9	68	57	83	9	28	26	92	9
South	19	111	102	91	19	72	72	100	9
Southeast	26	157	142	90	26	102	99	97	7
Venice	7	41	40	97	7	25	25	100	3
Wilmington	16	95	90	94	16	61	61	100	6
Total	88	535	481	89	88	322	317	98	9
SPRING 1967									
Northeast	20	114	90	78	20	80	80	100	22
Pacoima	19	111	106	95	19	64	60	93	-2
South	26	158	136	86	26	99	97	97	11
Southeast	28	169	161	95	28	92	86	93	-2
Venice	13	70	63	90	13	50	49	98	8
Wilmington	19	110	105	95	19	77	74	96	1
Total	125	732	661	90	125	462	446	96	6

Table A is based on Form 87B.

Table J, Addendum B, shows that of the 154 pupils who filled out the questionnaire, 71 percent indicated that they planned to continue their education next semester. The remainder of the pupils, for the most part, represented graduating seniors.

The counselor reported that seventy-two pupils received high school diplomas during the 1966-67 school year.

4.22 Objective: To improve the physical health of the children.

Table B reveals that there was a statistically significant improvement at the .01 level for pupils in both groups on a test of prenatal and infant care.

TABLE B

PRE AND POST MEAN SCORES ON THE PRENATAL AND INFANT CARE QUESTIONNAIRE

NUMBER OF WEEKS BETWEEN PRE AND POST	N	PRE MEAN	POST MEAN	CORRELATION
8-12	87	26.2	28.2**	.55
13 or more	19	25.7	29.8**	.75

Table B is based on Form 87A. **Sig at .01

A summary of health records kept by the nurse, Tables D through G, Addendum B, shows that she made 233 home calls and 472 referrals to agencies, hospitals, and private medical personnel. The nurse held 664 conferences with pupils and others concerned with the pupils' well-being and recorded 113 defective conditions.

4.23 Objective: To improve the children's emotional and social stability and/or that of their families.

Table C reveals that 94 percent of the pupils gave the highest rating to "... reactions to attending the Health Center class". Ninety percent accorded the two highest ratings to their "... reactions to lessons on prenatal and infant care". Eighty-nine percent gave the two highest ratings to their "... reactions to attending class with other pupils who also were expectant mothers or recent mothers". (The mean ratings of pupils in the summer session were similar to the ratings of the pupils enrolled during the school year.)

The graduation speech given by one of the pupils will be found in its entirety in Addendum B. The feelings expressed by this girl indicate that this objective was attained.

TABLE C

RATINGS OF PUPIL REACTIONS TO HEALTH CENTER CLASS

ITEM	FREQUENCY Little Value 1	2	Much Value 3	4	MEAN
1. What were your reactions to attending the Health Center class?	0 (0)	3 (1)	6 (0)	145 (31)	3.9 (3.9)
2. What were your reactions to the lessons on prenatal and infant care?	3 (1)	13 (0)	22 (3)	114 (28)	3.6 (3.8)
3. What were your reactions to attending class with other pupils who also were expectant mothers or recent mothers?	6 (2)	10 (2)	19 (3)	118 (25)	3.6 (3.6)

Table C is based on Form 87C. (Summer session ratings)

N = 155
(N = 32)

On a series of open end comments related to the ratings from 155 pupils, sixty-eight or 44 percent of the pupils commented that the Health Center classes were valuable to them because they were able to continue their education with only minor interruptions and forty-five or 29 percent responded that they were now able to graduate according to schedule.

One hundred twenty pupils or 78 percent commented that they learned a lot about caring for themselves and their babies which alleviated many of their fears about pregnancy and childbirth.

Ninety-one pupils or 59 percent responded that they had a feeling of security by attending class with others who were pregnant because they were in permissive situations where no one was critical of their condition. Forty-two pupils or 27 percent felt that they were able to share and discuss common problems concerning pregnancy which made them feel more comfortable.

4.24 Objective: <u>To identify specific strengths and weaknesses of the project</u>.

Data pertinent to this objective are found in Tables H through L, Addendum B. The ratings in Table H, items 8-11, indicate how the pupils felt about the services provided by the assistant supervisor of child welfare and attendance, counselor, and nurse. Thirty-two of the most urgent cases among the 155 pupils received child welfare and attendance services. Seventy percent of the pupils gave the two highest value ratings to services provided by the assistant supervisor of child welfare and attendance. An overwhelming majority accorded the two highest ratings to services provided by both counselor and nurse. The pupils were divided as to the value of the services provided by the health center social workers. Ratings by summer session pupils and staff personnel were similar.

When asked to name three people in rank order who proved to be most helpful to them during their enrollment in the health center classes, pupils ranked the family unit first, the teacher second, and their mother third. The nurse and counselor were ranked sixth and tenth (see Table I).

The ratings in Table K reveal that the teachers, counselor, nurse, and assistant supervisor of child welfare and attendance viewed the activities which were provided to meet the educational, physical health, and emotional and social needs of the pupils as having "much value".

Personnel comments concerning the strengths of the component were: the program kept the girls in school so that they could finish their education, medical help and health education were provided during and after pregnancy, attending classes with others having similar problems reinforced pupils efforts to maintain and gain improved mental health and a sense of security, many administrators displayed sympathetic attitudes towards the pregnant girls, the Los Angeles County Health Center staffs gave their fullest cooperation, and parents of pupils appreciated the opportunity for the girls to attend school.

Other personnel comments regarding the component were: the enrollment of girls who were in poor health due to their pregnancy, the failure to drop pupils who did not attend regularly or showed a lack of interest, and the lack of sufficient counseling staff to provide individual and group counseling to meet the emotional needs of the pupils and some of their parents.

Table L, Addendum B, shows the categories of ranked comments made by component personnel concerning the summer session. The data reveal that assistance was provided on a continuing basis during the summer period, pupils were motivated to continue their schooling, additional knowledge about pregnancy, nutrition, and delivery was made available. Poor attendance and the need for improved communication between the social worker and pupil were noted as weaknesses.

Interviews were held with the nurse, counselor, and assistant supervisor of child welfare and attendance which provided information on the strengths of the component and problems encountered in relation to their responsibilities. The following strengths were reported:

Nurse

-The positive manner in which sympathetic teachers and the staff received the girls.

-The formation of friendships among the girls which helped create positive feelings towards the activities.

Counselor

-The time lag between referral and placement of the girls in health center classes was reduced to one week or less because of the addition of a full-time counselor to the component.

-A significant number of potential dropouts remained in school and graduated.

-The addition of a clerk helped in the processing of girls into and out of the component.

Assistant supervisor of child welfare and attendance

-Some pupils who were behavior problems in regular school adjusted and matured in the health center classroom setting.

-Some pupils reported that they were enjoying school, and that they were experiencing school success for the first time.

-Changes of attitudes in some of the girls were demonstrated by their cooperation and serious work after returning to regular school classes.

The following problems were encountered:

Nurse

-Lack of counseling for married couples about finances and the role of the husband during the wife's pregnancy.

-Inadequate transportation in the Harbor and Pacoima areas which contributed to chronic absenteeism.

-Active resistance to instruction in nutrition.

-A need for the development of a curriculum guide on prenatal and infant care to provide continuity of instruction.

-A need for more contacts with private physicians because many of the girls misunderstood medical instructions given to them.

Counselor

-Locating and securing regular school records for some of the pupils.

-Inability to accommodate the large number of girls in health center classes.

-Insufficient time for counseling pupils concerning personal problems.

Assistant Supervisor of Child Welfare and Attendance

-The supervisor served six health center classes in widespread areas of the city which prevented her from becoming acquainted with all of the girls enrolled.

-The limited time allotted permitted her to service only five to seven girls in each health center class who had complex problems.

-Classroom turnover of pupils increased caseload.

4.30 Outcomes

The pupils were able to complete more subjects in the health center classes than they did in their last semester of regular school. At the end of the school

year, 97 percent of all subjects taken were passes as compared to 90 percent while in the regular school.

Pupil improvement was statistically significant on a test of their knowledge of prenatal and infant care.

Pupils indicated that attendance in health center classes alleviated their fears concerning pregnancy, childbirth, social non-acceptance, and graduation. This was confirmed by component personnel.

Pupils were divided about the value of their discussions with the health center social workers. The highest mean scores were given to discussions with the nurse both during the regular and summer sessions.

Seventy-one percent of the pupils indicated plans to continue their education the next semester. The remainder were mostly graduating seniors.

The time lag between referral and placement of the girls in health center classes was reduced to one week or less.

Seventy-two pupils earned high school diplomas by completing requirements in health center classes.

The health center nurse made 233 home calls, 472 referrals, and held 664 conferences.

5.00 CONCLUSIONS

The number of subjects successfully completed and the number of girls who planned to continue their education indicated improved holding power of the component.

Pupils were referred to appropriate medical services for their specific physical health needs.

The quality of the instructional program and the services of the staff helped meet the emotional and social needs of the pupils. Families also benefited from the services provided.

In the rank order of helpful persons designated by the expectant mothers, the family as a unit ranked first and the health center teachers placed second.

6.00 RECOMMENDATIONS

A centralized file of pupil information should be available for use by professional personnel.

Develop a curriculum guide related to the needs of school aged expectant mothers.

Provide additional counseling, child welfare and attendance, and related supportive personnel to insure more rapid and effective placement and programming of pupils.

ESEA Auxiliary Services Division Design #87 COMPONENT: Educational and Medical Services to School-Age Expectant Mothers

OBJECTIVES	DEPENDENT VARIABLES	ASSESSMENT DEVICES	COMMENTS
To improve the holding power of schools (to decrease the dropout rate)	Retention rate	Pupil Information (87B)	Report card marks of last completed semester in regular school and final semester marks in Fall 1966 and/or Spring 1967 Health Center classes Summary of subjects passed by project pupils
To improve the physical health of the children	Health ratings	Medical Information Card (HEEA-6) Request for Home Visit (33.127)	Summary of anecdotal records by project nurse
	Changes in knowledge	Prenatal and Infant Care Questionnaire (87A)	Pretests and posttests administered in October and January and February and May
To improve the children's emotional and social stability and/or that of their families	Attitudes	Pupil Reaction Form (87C)	Items 1-3
To identify specific strengths and weaknesses of the project	Ratings	Project Personnel Reaction Form (87D) (201A) Summer	Teachers, Nurse, Counselor, Assistant Supervisor of Child Welfare and Attendance, and Coordinator
		Pupil Reaction Form (87C)	
		Structured Interview (87F)	Nurse, Counselor, and Assistant Supervisor of Child Welfare and Attendance

TABLE D

HOME CALLS MADE BY THE NURSE

HOME CALLS	SCHOOL YEAR 1966-67
Postpartum Visits	162
Teacher Requests	24
Absentees	13
Illness other than Postpartum	34
Total	233

Nurse served 6 Health Center classes.
Table D is based on Forms 33.127 and [illegible].

TABLE E

REFERRALS MADE BY THE NURSE

TYPES OF REFERRAL	SCHOOL YEAR 1966-67
County Health Department	113
Department of Social Services	29
Los Angeles General Hospital	66
Medical Social Service	28
Orthopedic Hospital	3
Private Physicians	51
Private Hospitals	22
Probation Officers	3
P.T.A. Clinic	5
Seventh Day Adventist Health and Welfare Service	6
Well Baby Conference in the County Health Department	126
Total	472

Table E is based on Form ESEA-6.

TABLE F

CONFERENCES HELD BY THE NURSE

CONFERENCES	SCHOOL YEAR 1966-67
Pupils (prenatal, past medical, and postpartum histories, misc.)	423
Parents	120
Husbands	8
Teachers	35
Medical Social Workers	19
Private Physicians	22
Administrators	10
Public Health Nurses	25
Total	664

Table F is based on Form ESEA-6.

TABLE G

DEFECTIVE CONDITIONS REPORTED BY THE NURSE

TYPES	SCHOOL YEAR 1966-67
Anemia (before pregnancy)	17
Dental Caries	47
Loss of Hearing	1
Kidney Infections	6
Obesity	3
Toxemia (as a result of pregnancy)	30
Poor Vision	9
Total	113

Table G is based on Form ESEA-6.

TABLE H

RATINGS OF PUPIL REACTIONS TO SERVICES PROVIDED BY PROJECT PERSONNEL

ITEM	Little Value 1	2	Much Value 3	4	MEAN
8. How did you feel about your discussions with the Health Center social worker?	33 (8)	22 (2)	33 (3)	30 (5)	2.5 (2.3)
10. How did you feel about your discussions with the Health Center counselor	4 (1)	10 (1)	27 (10)	78 (20)	3.5 (3.5)
11. How did you feel about your discussions with the Health Center nurse?	3 (0)	12 (1)	19 (1)	116 (30)	3.6 (3.9)
9. How did you feel about the services of the Child Welfare and Attendance worker?	1 (1)	7 (0)	6 (0)	17 (3)	3.3 (3.2)

Table H is based on Form 87C.
(Summer session ratings)

N = 155
(N = 32)

TABLE I

RANK ORDER OF PERSONS DESIGNATED AS HELPFUL TO SCHOOL-AGE EXPECTANT MOTHERS

WEIGHTED RANK*	PERSONS	FIRST CHOICE FREQUENCY	SECOND CHOICE FREQUENCY	THIRD CHOICE FREQUENCY
1	Family	44	8	5
2	Teacher	17	28	36
3	Mother	28	17	3
4	Doctor	13	19	--
5	Friends	8	11	17
6	Nurse	7	13	--
7	Husband	7	9	--
8.5	Parents	8	1	1
8.5	Social Worker	2	7	7
10	Counselor	1	3	7
11	Aunt	2	4	1
12	Grandmother	2	1	4
13	Boyfriend	2	--	3
14.5	Sister	1	1	3
14.5	Neighbors	--	4	--
16	Father	--	3	--
17	Vice principal	1	1	--
18.5	Stepmother	1	--	1
18.5	Housemother	--	2	--

*Weighted scores - first choice=3, second choice=2, and third choice=1.
Table I is based on Form 87C.

TABLE J

PUPIL PLANS FOR NEXT SEMESTER

PREFERENCE	FREQUENCY							TOTAL
	A9	B10	A10	B11	A11	B12	A12	
Get 12th grade diploma						18		18 (12%)
Get 9th grade diploma	3							3 (2%)
Return to regular school		5	6	23	23	5	1	63 (41%)
Go to trade/night school			1	2		1	7	11 (7%)
Go to junior college or college							14	14 (9%)
Get a job						4	13	17 (11%)
Stay home and care for baby	1						15	16 (10%)
Don't know				1	1		3	5 (3%)
Other				7				7 (5%)

Table J is based on Form 87C. N = 154

TABLE K

RATINGS OF PROJECT PERSONNEL REACTIONS

ITEM	FREQUENCY Little Value 1	2	Much Value 3	4	MEAN
1. What were your reactions to the project activities implemented to satisfy the educational needs of the pupils?	0	0	2	7	3.8
2. What were your reactions to the project activities implemented to satisfy the physical needs of the pupils?	0	0	1	9	3.9
3. What were your reactions to the project activities implemented to satisfy the emotional and social needs of the pupils?	0	0	3	5	3.6

Table K is based on Form 87D.

TABLE L

CATEGORIES OF RANKED COMMENTS MADE BY
COMPONENT PERSONNEL CONCERNING SUMMER SESSION

ITEM	CHOICE 1	2	3.
Strengths:			
Provided continuing daily educational environment	2	2	-
Motivated pupils to continue school	2	1	1
Assigned two full-time teachers to teach each class	2	-	1
Provided through the nurse knowledge about pregnancy, nutrition, and delivery	1	2	-
Weaknesses:			
Poor attendance due to illness, medical appointments, missing the bus, and early bus pick-up	1	3	-
Communication between social worker and pupils	2	-	-

Table L is based on Form 201A

N=8

LOS ANGELES CITY SCHOOLS

Graduation speech given June, 1967
by a pupil graduating from a class-
room for School-Age Expectant Mothers

IN APPRECIATION

Distinguished guests, ladies and gentlemen, fellow graduates and students....

As I look at myself and the other graduates, I suddenly realize that this is the proudest moment of my life.

I guess no one will realize how much I love this school and all the memories that it holds for me. I have so much to be grateful for. A few years ago, I probably would not have had the opportunity I have today. The opportunity to finish my education and more important the salvation of my dreams. A few years ago, I would have had to drop out of school and maybe lose myself to a meaningless life. Today I am receiving my diploma and going on to building a future for myself.

When first confronted with my problem, it suddenly occurred to me how time was so short and precious. We have to make our decisions about our future while in high school and follow it out. But, to me time was always endless, until I had realized that time had almost stopped for me. The thought of dropping out of school made me feel that all twelve years of previous schooling was wasted because I could not get my diploma.

But through this school, my life can go on. Going to this school not only made me appreciate education more, it also encouraged me to ignite the flame of my ambition I thought was extinguished. It made me study harder and I found myself enjoying it. I acquired a thirst for more knowledge and a newfound thrill everytime I learned something new.

It isn't hard to start over again when you have parents like mine, who in spite of everything, stood behind me and encouraged me all the way. It isn't hard when you have a Girls' Vice-Principal like Miss Sullivan, who befriended and helped me, or Mrs. Bennett, our teacher, here at Widney, who laughed with us and shared our problems and dreams, as well as taught us. There are others too, like Mr. Hay, our counselor, who guided and listened to our grievances and Mrs. Clarke, our nurse, who advised and dispelled our many worries and questions on health conditions. There is a special feeling of gratitude within me for Dr. Lyons. It is this pioneer who made it possible for girls like us to continue with our education. And of course, I can't forget all the girls. It is this sharing and giving of their spirit, their friendship and memories I will always cherish. It is to these people I dedicate my gratitude and appreciation. Thank you all for believing in me, encouraging, and restoring my faith in myself.

Yes, I have a lot to be grateful for, and I want to show my gratitude to all who have helped me. For now I am thanking you verbally, but I plan to do more. Because Mrs. Bennett was such an inspiration and I have grown attached to this school, I plan to go on to college and eventually become a teacher like Mrs. Bennett. I would like to help the girls who will come after me to find the courage and understanding as well as education they will need to start their life with a brighter future. I know this program needs more teachers and I want other girls to have the "second chance" that I had. I don't want to see girls miss the opportunity I had, to change or shape their futures for the better.

Some day I will be able to say to Mom and Dad, Mrs. Bennett, Mr. Hay, Mrs. Clarke, Miss Sullivan, and Dr. Lyons, thank you for believing in me and all that you did for me, and here is my debt paid back.